

APPROVAL FOR OPERATION

N.H. DEPARTMENT OF ENVIRONMENTAL SERVICES
SUBSURFACE SYSTEMS BUREAU
CA2001035590 P.O. BOX 95, 6 HAZEN DRIVE, CONCORD, NH 03302-0095

APPROVAL NO. CA2001035590

AMENDED DUE TO:

OWNER:

MOUNT WASHINGTON OBSERVATORY CHARITABLE
PO BOX 2310
NORTH CONWAY NH 03860-

Map No./Lot No.: 1RTD16 / 10
Subd. Appvl. No. 5+ ACRES
Subd. Name:
County: CARROLL
Registry Book No.: 1726
Registry Page No.: 113
Probate Docket No.:
(If Applicable)

COPY SENT TO:

TOWN OF BARTLETT
RFD 1 BOX 49
INTERVALE NH 03845-

Type of System: 0
HR
300 GPD
Town/City Location: BARTLETT
Street Location: ROUTE 16

Subsurface waste disposal systems must be operated and maintained in a manner so as to prevent nuisance or health hazard due to system failure.
(RSA 485-A:37)

It is unlawful to discharge any hazardous chemicals or substances into subsurface waste disposal systems. Included are paints, thinners, gasoline and chlorinated hydrocarbon solvents such as TCE, sometimes used to clean failed septic systems and auto parts.
(Env-Ws 410.05)

Installer Lloyd Drew Permit No. 420

Owner Installed For His/Her Domicile

Was Inspected On (Date) 30 July 2001
Before Covering And Is Hereby Approved For Use.

Date Approved: 11 30 July 2001

By: [Signature]
Authorized Agent Of N.H. Department of
Environmental Services

(OVER)

REVISED 6/97

200104268

NHDES SSB FILE

APPROVAL FOR OPERATION

GOLD = Owner's YELLOW = Town's BLUE = NHDES, SSB file

N.H. DEPARTMENT OF ENVIRONMENTAL SERVICES
SUBSURFACE SYSTEMS BUREAU
P.O. BOX 95, 6 HAZEN DRIVE, CONCORD, NH 03302-0095

1.13 ACRES

CARROLL

THIS APPROVAL DOES NOT SUPERSEDE ANY EQUIVALENT OR MORE STRINGENT LOCAL ORDINANCES OR REGULATIONS. STATE STANDARDS ARE MINIMAL AND MUST BE MET STATEWIDE.

IN THE EVENT OF SYSTEM FAILURE, IT SHALL BE THE RESPONSIBILITY OF THE OWNER TO CORRECT ANY SUCH FAILURE.

NO LIABILITY IS INCURRED BY THE STATE by reason of any approval of subdivision plans or any approval to construct or use a sewage or waste disposal system. Approval by the Department of Environmental Services of sewage and waste disposal systems and subdivisions is based on plans and specifications supplied by the applicant.

NO GUARANTEE IS INTENDED OR IMPLIED BY REASON OF ANY ADVICE GIVEN BY THE DEPARTMENT OR ITS STAFF.

AMENDED DUE TO

OWNER:

COPY SENT TO

TOWN OF BARTLETT

INTERVAL PERIOD

ROUTE 16

location

ANY SUCH FAILURE.

Permit No. 480

Installer: *Hayes Bros*

Date Approved: *11 30 July 2001*

(OVER)

REVISED 8/81

APPROVAL FOR CONSTRUCTION

CA2001035590 N.H. DEPARTMENT OF ENVIRONMENTAL SERVICES
SUBSURFACE SYSTEMS BUREAU
P.O. BOX 95, 6 HAZEN DRIVE, CONCORD, NH 03302-0095 APPROVAL NO. CA2001035590

THE PLANS AND SPECIFICATIONS FOR SEWAGE OR WASTE DISPOSAL SYSTEM SUBMITTED FOR:

OWNER:

MOUNT WASHINGTON OBSERVATORY CHARITABLE
PO BOX 2310
NORTH CONWAY NH 03860-

Map No./Lot No.: 1RT016 / 10
Subd. Appvl. No. 5+ ACRES
Subd. Name:
County: CARROLL
Registry Book No.: 1726
Registry Page No.: 113
Probate Docket No.:
(If Applicable)

COPY SENT TO:

TOWN OF BARTLETT
RFD 1 BOX 49
INTERVALE NH 03845-

Type of System: BR
300 GPD
Town/City Location: BARTLETT
Street Location: ROUTE 16

BY APPLICANT: PERMIT NO.

00830

STEVEN J SMITH & ASSOC INC
6 LILY POND RD
GILFORD NH 03249

Subsurface waste disposal systems must be operated and maintained in a manner so as to prevent nuisance or health hazard due to system failure.
(RSA 485-A:37)

It is unlawful to discharge any hazardous chemicals or substances into subsurface waste disposal systems. Included are paints, thinners, gasoline and chlorinated hydrocarbon solvents such as TCE, sometimes used to clean failed septic systems and auto parts.
(Env-Ws 410.05)

ADVISE YOUR CONTRACTOR OF REQUIRED CHANGES IN PLANS AS INDICATED BELOW CONDITIONS

1. APPROVAL FOR (19) EMPLOYEES AT 15 GPD/EMPLOYEE. (NO CAFETERIA OR SHOWERS). (THIS APPROVAL COVERS THE ADDITION OF THE RESEARCH BUILDING ONLY).
2. PROVIDE A CLEANOUT IN THE SEWERLINE BETWEEN THE BUILDING AND TANK (ENV-WS 1000).
3. PUMP CHAMBER MUST BE VENTED (ENV-WS 1000).
4. ADDRESS ENV-WS 1009.03 WHERE APPLICABLE.

Approved this date: 07/11/2001
Date amended: _____

By: 
ERIC J THOMAS
N.H. Department of Environmental Services Staff
Amended by: _____

(OVER)

NEW DEPARTMENT OF ENVIRONMENTAL SERVICES
WASTEWATER SYSTEMS BUREAU
1000 WEST 4TH AVENUE, DENVER, COLORADO 80202

THIS APPROVAL DOES NOT INCLUDE DESIGN, CONSTRUCTION OR MAINTENANCE OF THE SYSTEM. THE USER SHALL BE RESPONSIBLE FOR THE DESIGN, CONSTRUCTION AND MAINTENANCE OF THE SYSTEM. THE BUREAU'S APPROVAL IS LIMITED TO THE STATEWIDE

IN THE EVENT OF SYSTEM FAILURE, IT SHALL BE THE RESPONSIBILITY OF THE OWNER TO CORRECT ANY SUCH FAILURE.

THE USER SHALL BE RESPONSIBLE FOR THE DESIGN, CONSTRUCTION AND MAINTENANCE OF THE SYSTEM. THE BUREAU'S APPROVAL IS LIMITED TO THE STATEWIDE

NO CHARGE IS BEING MADE FOR THE APPROVAL OF THIS SYSTEM. ANY ADDITIONAL CHARGES WILL BE MADE AT THE USER'S OPTION.

PLEASE POST IN A CONSPICUOUS PLACE DURING CONSTRUCTION

The following information is provided for the user's information. The user shall be responsible for the design, construction and maintenance of the system. The Bureau's approval is limited to the statewide

The user shall be responsible for the design, construction and maintenance of the system. The Bureau's approval is limited to the statewide



State of New Hampshire
DEPARTMENT OF ENVIRONMENTAL SERVICES

6 Hazen Drive, P.O. Box 95, Concord, NH 03302-0095
(603) 271-3501 FAX (603) 271-6683



July 09, 2001

STEVEN J SMITH & ASSOC INC
6 LILY POND RD
GILFORD NH 03249

RE: WN: 200104268, Mount Washington Observatory Charitable Trust, Map/Lot: 1RT016 /
10, Bartlett

Dear Designer:

A review of the information you provided for this proposed disposal system has been completed. We regret to inform you that this plan is disapproved at this time. However, if the following items are addressed, we will reconsider the application:

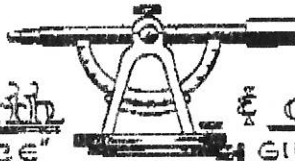
Please provide a operational approval slip for the system. *✓ enclosed*

If you have any questions, please respond to me at the address above.

Sincerely,

Eric J. Thomas
Subsurface Systems Bureau
Water Division

cc: Designer File # 00830



steven j. smith
"POND SIDE PLACE"
6 LILY POND ROAD

& associates, inc.
GILFORD, N.H. 03246
PHONE: (603) 524-1468
FAX: (603) 524-4731

Steven J. Smith, Sr.
President
LLS NH #598

Michael B. Bennis
V.P. Surveying
LLS NH #612

William Stack
V.P. Engineering
PE NH #5390

Peter W. Howard
PE NH #7668

FAX TRANSMITTAL

271-6683

DATE: 7/10/01

TO: NH DES

ATTENTION: Eric Thomas

FROM: Peter W. Howard

NUMBER OF PAGES, INCLUDING COVER SHEET: 2

NOTES:

Operational App 1

Mt. Washington Observatory Char Remainder

As requested.

Thank you
P.W. Howard

SHOULD ANY PAGES NEED TO BE RETRANSMITTED, PLEASE CALL (603) 524-1468
AND ASK FOR THE PERSON SENDING THE FAX. OUR DIRECT FAX NUMBER IS
(603) 524-4731 AND E-MAIL IS sisinc@worldpath.net

APPROVAL FOR OPERATION

N.H. DEPARTMENT OF ENVIRONMENTAL SERVICES
RESURFACING SYSTEMS BUREAU
P.O. BOX 85, 6 HAZEN DRIVE, CONCORD, NH 03305-0085

APPROVAL NO. CA1999013664

CA1999013664

ISSUES ONE TO

OWNER:

MT WASHINGTON OVERVIEW CHAR. REMAINDER
PO BOX 2010
BARTLETT NH 03824

1 RT 016 / L10
37 ACRES

Map No./Lot No.:
Subd. Appl. No.:
Subd. Name:
County:
Registery Book No. 1776
Registery Page No. 113
Approp. Deed No. 113
(if Applicable)

COPY SENT TO:

TOWN OF BARTLETT
PO BOX 49
BARTLETT NH 03824

Type of System:
O
URK
300 GPD

Location:
NH ROUTE 16 UN ROUTE 302

Permit No. 420

Sanitary waste disposal systems must be operated and maintained in a manner so as to prevent odors or leaks from the disposal system.
(RSA-654:29)

It is intended to discharge any hazardous constituents of substances into sanitary waste disposal systems, including air paints, thinners, pastes and chlorinated hydrocarbon solvents such as TCE, sometimes used to clean lathe/septic systems and sulfuric acid.
410.63

Installer: Lloyd Deane

Owner Installed For Health Domicile

Was Inspected On (Date): 19 Nov 21 Dec 1999

Before Covering And In Ready Approved For Use.

Date Approved: 11 21 Dec 1999

By: [Signature]

Environmental Services

OVER

REVISED 6/87

199901315

OWNER'S

APPROVAL FOR CONSTRUCTION

CA1999015664

N.H. DEPARTMENT OF ENVIRONMENTAL SERVICES
SUBSURFACE SYSTEMS BUREAU
P.O. BOX 95, 6 HAZEN DRIVE, CONCORD, NH 03302-0095

APPROVAL NO. CA1999015664

THE PLANS AND SPECIFICATIONS FOR SEWAGE OR WASTE DISPOSAL SYSTEM SUBMITTED FOR:

OWNER:

MT WASHINGTON OBSERV CHAR REMAINDER
PO BOX 2310
BARTLETT NH 03845

Map No./Lot No.: 1 RT 016 / L10
Subd. Appvl. No.: 5+ ACRES
Subd. Name:
County: CARROLL
Registry Book No.: 1726
Registry Page No.: 113
Probate Docket No.:
(If Applicable)

COPY SENT TO:

TOWN OF BARTLETT
RFD 1 BOX 49
BARTLETT NH 03845

Type of System: 0 BR
300 GPD
Town/City Location: BARTLETT

BY APPLICANT: PERMIT NO.

00830
STEVEN J SMITH & ASSOCIATES INC
6 LILY POND RD
GILFORD NH 03246

Street Location: NH ROUTE 16 US ROUTE 302

Subsurface waste disposal systems must be operated and maintained in a manner so as to prevent nuisance or health hazard due to system failure. (RSA 485-A:37)

It is unlawful to discharge any hazardous chemicals or substances into subsurface waste disposal systems. Included are paints, thinners, gasoline and chlorinated hydrocarbon solvents such as TCE, sometimes used to clean failed septic systems and auto parts. (Env-Ws 410.05)

**ADVISE YOUR CONTRACTOR OF REQUIRED CHANGES
IN PLANS AS INDICATED BELOW CONDITIONS**

APPROVED 1-4 PART-TIME OBSERVERS OR MAINTENANCE PERSONAL WITHOUT A CAFETERIA OR SHOWER -
TOTAL FLOW 300 GPD. PUMP CHAMBER MUST BE VENTED. PUMP SYSTEM - DO NOT USE FLOW EQUALIZER OR
OTHER RESTRICTING DEVICES IN THE OUTLET LINES OF THE D-BOX.

RECEIVED
JUL 05 1999
By _____

Approved this date: 03/11/1999

By:

Stan Bomba
STANISLAW BOMBA

N.H. Department of Environmental Services Staff

Date amended:

Amended by:

(OVER)

REVISED 6/97

199901355

APPLICANT'S

WORLD PATH & ASSOC., INC.
 Pondsides Place
 6 Lily Pond Road
 GILFORD, NEW HAMPSHIRE 03249

LETTER OF TRANSMITTAL

(603) 524-1468
 sjsinc@worldpath.net

TO NHDES- Subsurface Systems
PO Box 95
Concord, NH 03302-0095

DATE	6/29/01	JOB NO.	98095
ATTENTION			
RE:	Mt. Washington Observatory Charitable Remainder Trust		
	Revised Design. CA 1999015664.		

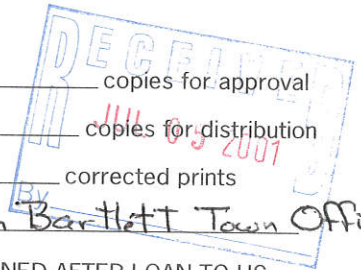
WE ARE SENDING YOU Attached Under separate cover via _____ the following items:

- Shop drawings Prints Plans Samples Specifications
 Copy of letter Change order _____

COPIES	DATE	NO.	DESCRIPTION
1			Application- Individual SDS- (Revised)
3	6/29/01	(98095 SDS)	3 sets (Sheets 1+2) Design Plans-
1			\$80 ⁰⁰ review fee.
1 copy			1999, CA 1999015664. dated 3/11/99.

THESE ARE TRANSMITTED as checked below:

- For approval Approved as submitted Resubmit _____ copies for approval
 For your use Approved as noted Submit _____ copies for distribution
 As requested Returned for corrections Return _____ corrected prints
 For review and comment Being transmitted through Bartlett Town Offices.
 FOR BIDS DUE _____ Re: Lynn Jones. PRINTS RETURNED AFTER LOAN TO US



REMARKS

CA 1999015664 is being revised by adding a proposed research building w/ 15 or less employees to the existing system, approved + constructed in 1999.

The field and tank are adequate to handle the combined loads of the LIDAR bldg (60 GPD) and the new research building (225 GPD)

Thank you.

COPY TO Brian Lombard, Amoskeg Falls
Clark REI Management Corp.
 file

SIGNED: Peter W. Howard, 830,
RE. 7668

If enclosures are not as noted, kindly notify us at once.

STEVEN J. SMITH

2000, INC.
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Charles
James

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Construction Approval No. CA 2001035590

CONSTRUCTION APPROVAL CHECKLIST

TOWN: Bartlett
SUBDIVISION NAME: _____
Owner: Mt. Washington Assoc.
SIZE: _____ (BR) FLOW: 300 (GPD)
DESCRIPTION/TYPE OF SYSTEM: _____

Work No. 04268
SUBDIVISION APPROVAL NO: 5 acres
LOT NUMBER/UNIT NUMBER: 10

- | <u>TYPE</u> | <u>DESIGN</u> |
|--|--|
| <input type="checkbox"/> 1. Single Family Residence (4-bedroom max.) | <input checked="" type="checkbox"/> n. In-ground |
| <input type="checkbox"/> 2. Apartment | <input type="checkbox"/> o. Above-ground/Mounded |
| <input type="checkbox"/> 3. Condominium | <input type="checkbox"/> p. Ledge Lot |
| <input type="checkbox"/> 4. Manufactured Housing Park | <input type="checkbox"/> q. Chambers |
| <input type="checkbox"/> 5. Camping/Tenting | <input type="checkbox"/> r. Pressure Distribution |
| <input type="checkbox"/> 6. Commercial | <input type="checkbox"/> s. Dry Well |
| <input type="checkbox"/> 7. Industrial | <input type="checkbox"/> t. Trenches |
| <input checked="" type="checkbox"/> 8. Public Food Handling | <input checked="" type="checkbox"/> u. Modified Dry Well |
| <input checked="" type="checkbox"/> 9. Duplex | <input checked="" type="checkbox"/> v. Holding Tank |
| <input checked="" type="checkbox"/> 10. Other | <input type="checkbox"/> z. Other |

- Provide offer slip approval slip -

Waiver Granted (yes/no): _____

Previous Construction Approval # CA1999015664 Status: 1. New 2. Replacement 3. Amended 4. Revised 5. Other

RETURN DATE:

7-9-01

BY: E.I.T.

RETURN REASON:

MEMO

RESUBMITTAL DATE:

APPLICATION DATE: 7-5-01

SITE INSPECTION DATE: _____

PROJECT COORDINATOR: _____

APPROVALS REQUIRED: D&F _____ 485-A:17 _____ WS _____ (UIC)GWP _____ Other _____

SOILS GROUP: (1) TYPE: Colton LOT SIZE: 139 acres

PERC. RATE: 2 min/inch AMEND: _____ APPROVAL DATE: 7-11-01

CONDITIONS: - Approval for (19) employees at 15 gpd/amp. (No cafeteria or showers) (This approval covers the addition of the research bldg. only)

APPROVED BY: E. McThomas

(LIMIT-2 CONDITIONS - 62 CHARACTERS EACH) - Provide cleanout in the sewerline between the bldg and tank. (EAV-WS1000)
- Pump chamber must be vented (EAV-WS1000)
- Address EAV-WS1009.03 where applicable.

DESIGN INTENT

() OK ON PLAN

NOTE: (✓) Gravity System (✓) Other

Bed bottom to be set:

- (✓) no deeper than _____ " below the original ground. (✓) _____' min. above the reported/any S.H.W.T.
- (✓) no less than 2.5 " above the original ground. () _____' min. above the reported/any ledge depth.
- (✓) no lower than the original ground at high contour. () _____' min. above the reported/any impermeable soil.
- (✓) Fill spec. OK.

to maintain:

- 1. DESIGNER'S SEAL
- 2. TOWN APPROVAL (stamp and/or signature required)
- 3. P.E. STAMP (systems greater than 2500 GPD, 600 GPD on ledge lots - same person as designer).
- 4. TWO (preferably 3) COPIES
- 5. SCALE 1" = 20' Plan
- 6. SIZE - fold to 8 1/2 X 11", location plan and title showing.
- 7. LOT PLAN - with dimensions and area shown.
- 8. BUILDINGS - existing and proposed shown.
- 9. WELL - location & radius (keep radius within lot lines if possible).
- 10. WATER PIPES - proposed & existing from well or main.
- 11. DISPOSAL SYSTEM SCALE PLAN - all proposed components & piping.
- 12. SEPTIC TANK - location, size, volume, material.
- 13. SECTION THRU SYSTEM - show original grade profile.
- 14. KEY ELEVATIONS & INVERTS
- 15. PIPE SLOPES & SIZE - recommend Sch 40 or Cast Iron thru foundation to tank.
- 16. MANUFACTURE, SPECIFICATIONS & MATERIALS - all key components; include tanks, D-Box, pumps & piping.
- 17. TOPO - 2 foot contours, 75' all direction from proposed system, including detail beyond property line.
- 18. LEACHING PIPE - statement pipes are to be level.
- 19. SEPTIC STONE - indicate specifications.
- 20. CHAMBER DETAILS - vents, wire mesh, flow distribution (40% non-commercial dwellings only).
- 21. PRESSURE DISTRIBUTION - calculations, basal area delineation and construction requirements.
- 22. LOCATION PLAN - with detailed directions to site, include mileages from intersections, poles (show number) and landmarks.
- 23. MINIMUM 3" LOAM SLOPE - shown for raised systems.
- 24. SEALANTS - specify for pipe penetrations & tank joints (not roof tar).
- 25. SURFACE WATER - nearest location, include seasonal wet areas & channels - state if none within 75'.
- 26. LEDGE - outcrops or boulders greater than six foot diameter, within 75 feet of system.
- 27. FOUNDATION DRAINS & OUTLET LOCATION - if none, so state.
- 28. BENCH MARK - permanent, close to & within sight of system
- 29. TIES TO FIELD - at least two to permanent or semi-permanent control points.
- 30. USE - indicate if residential or commercial and type of facility, within flow calculations, i.e. condo, apartment, restaurant, office, etc.
- 31. FLOW CALCULATIONS (or bedroom count for residential).
- 32. TEST PIT - location & depth to ledge, impervious & S.H.W.T. mark with stakes and numbers in field.
- 33. SOILS LOG - descriptions of types & properties including color, texture, structure, consistency and depth to mottling.
- 34. SOILS CLASSIFICATION - SCS survey data & copy of mapping with locus. Clearly show number or abbreviation.
- 35. PERCOLATION TEST - location, depth & rate.
- 36. PUMP SYSTEM - specs., detail, dose volume, pump size, wiring spec, valves & piping, controls & control elevations, alarm, capacity and heads of pumps.
- 37. REPLACEMENT SYSTEM - location or narrative to indicate failure or reason for new design.
- 38. HOLDING TANKS - waiver form, 2000 gallons minimum, alarm, water tight.
- 39. RECEIVING AREA/LAYER - adequate (75 feet); HYDRIC BOUNDARIES
- 40. MINIMUM - system 300 GPD system design size (300 GPD commercial).

ATTACH ADDITIONAL CONDITIONS, ETC. TO BE TYPED ON APPROVAL ("REMARKS" ON BOTTOM OF REVERSE SIDE - TYPED BY W. PROC. AS CONDITIONS ON APPROVAL)

200104268



State of New Hampshire
DEPARTMENT OF ENVIRONMENTAL SERVICES

Subsurface Systems Bureau
6 Hazen Drive, P.O. Box 95, Concord, NH 03302-0095
603-271-3501 FAX 603-271-6683
TDD Access: Relay NH 1-800-735-2964



8/10.00 JUL 05 2001
1312 0

APPLICATION FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM APPROVAL

FOR OFFICE USE ONLY
Fee Paid 80.00 Date Received JUL 05 2001 TOTAL FEE \$80.00
Failed System/Replacement Expedite
Check No. 1311 Waiver Request Holding Tank

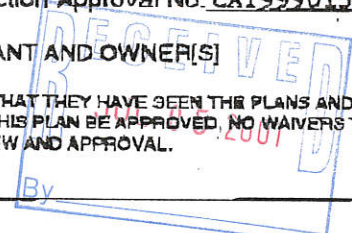
PLEASE PRINT OR WRITE LEGIBLY COMPLETE ENTIRE FORM

- System Location:
CITY/TOWN: Bartlett CITY/TOWN APPROVAL OBTAINED: YES IF YES/DATE 7/6/01
STREET/LOCATION NH Route 16/US Route 302 LOT NO: 10 TAX MAP NO: 1RT016
SUBDIVISION NAME: N/A REGISTRY BOOK NO. 1726 PAGE NO: 113
STATE APPROVAL NO. N/A 5+ Acres COUNTY: Carroll PROBATE NO. (If Applicable)
- Water Supply:
MUNICIPAL WATER SUPPLY COMMUNITY WELL ON LOT x OTHER
- Lot OWNER'S Name: Mt. Washington Obsery Char Remainder STREET: PO Box 2310
CITY/TOWN: Bartlett STATE: NH ZIP: 03845 TEL NO: 356-8645
- APPLICANT'S Name: Steven J. Smith & Associates, Inc. STREET: 6 Lily Pond Road
CITY/TOWN: Gilford STATE: NH ZIP: 03249 TEL NO: 524-1468
Designer's Name: Peter W. Howard Permit No: 830 P.E.:
(P.E. required if 2,500 GPD or more)
- Amended Plan Revised Plan x Previous Construction Approval No. CA1999015664

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE APPLICANT AND OWNER(S)

Owner(s):
THE UNDERSIGNED CERTIFY THAT THEY ARE THE PRESENT OWNERS OF THE PROPERTY BEING APPLIED FOR AND THAT THEY HAVE SEEN THE PLANS AND THEY ARE IN ACCORDANCE WITH THEIR NEEDS AND DESIRES. THE UNDERSIGNED FULLY UNDERSTANDS THAT SHOULD THIS PLAN BE APPROVED, NO WAIVERS TO THE CONSTRUCTION APPROVAL WILL BE ALLOWED. ANY CHANGES WILL REQUIRE A NEW SUBMISSION (WITH FEE), REVIEW AND APPROVAL.

Date: 6/28/2001 Signed: [Signature]



Applicant:
To the best of my knowledge, the data and information which I have submitted to obtain approval for construction from the New Hampshire Department of Environmental Services is true and correct. I understand that an approval based upon incorrect data may be subject to revocation. I also understand that NO CONSTRUCTION OF ANY STRUCTURES SERVICED BY THE PROPOSED SYSTEM, NOR THE SYSTEM ITSELF, MAY COMMENCE WITHOUT PRIOR WRITTEN DEPARTMENT APPROVAL. I HAVE COMPLIED WITH ALL LOCAL REGULATIONS OR ORDINANCES RELATIVE TO CONSTRUCTION OF SEWAGE DISPOSAL SYSTEMS AND HAVE OBTAINED ALL OTHER APPROVALS THAT MAY BE REQUIRED FOR OTHER WORK RELATED TO CONSTRUCTION OF THE SEWAGE DISPOSAL SYSTEM. The applicant herewith certifies, where applicable, that the approved off-site, municipal or community, water supply is available at the lot line.

Date 6/29/01 Signed: Peter W. Howard Applicant
Permit No. 830

Shoreland Protection Certification

Introduction

The New Hampshire Shoreland Protection Act (RSA 483-B) requires that applicants for environmental permits which involve work in the protected shoreland "demonstrate to the satisfaction of the department (of environmental services) that the proposal meets or exceeds the development standards of this chapter." The certification contained herein is an acceptable vehicle for such a demonstration.

The protected shoreland is defined to be all land located within 250 feet of a reference line. The reference line means:

- (a) For natural fresh water bodies without artificial impoundments, the natural mean high water level as determined by the Department of Environmental Services.
- (b) For artificially impounded fresh water bodies with established flowage rights, the limit of the flowage rights, and for water bodies without established flowage rights, the waterline at full pond as determined by the elevation of the spillway crest.
- (c) For coastal waters, the highest observable tide line, which means a line defining the furthest landward limit of tidal flow, not including storm events, which can be recognized by indicators such as the presence of a strand line of floeum and debris, the land ward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.
- (d) For rivers, the ordinary high water mark.

In the case of rivers, the law applies to all fourth order or higher streams of the state with the exception of rivers or river segments designated for management and protection under RSA 483 prior to January 1, 1993. Lists of fourth order and higher streams and river segments designated under RSA 483 are available at no cost from the Department of Environmental Services.

Statement of Compliance

- 1) Will the project for which a permit is hereby requested involve construction, land clearing, or other development within the protected shoreland as defined above? Answer yes or no. Answer No
- 2) If the project involves construction, land clearing, or other development within the protected shoreland, will it meet or exceed the development standards of RSA 483-B? Answer yes, or not applicable. Answer _____

If not applicable, state why _____

(Note, the development standards are not applicable in only three situations: (1) the project is not located in the protected shoreland, (2) the activities are exempted under section 483-B:9.V or section 483-B:19, of the Act, or (3) the Commissioner of the Department of Environmental Services has granted a variance from a specific standard.)

Certification

As owner or agent for the owner of the subject property, by my signature below, I certify that:

- (a) My responses to questions 1 and 2 above are correct to the best of my knowledge,
(b) I am familiar with the requirements of RSA 483-B and have knowledge of the development activities which will be undertaken,
(c) The plans and other information submitted with this permit application provide a complete description of the project and demonstrate how compliance will be accomplished, and
(d) I understand that false information given in this certification may result in revocation of any permit granted by the Department of Environmental Services as a result of this application, liability for remediation or restoration of the land affected, fines up to \$20,000 for each day of continuing violation, imprisonment or other penalties.

Certified by Peter W. Howard Date 6/29/01

Name (print or type) Peter W. Howard owner or agent (circle one)

YOU MUST SUBMIT THE FOLLOWING INFORMATION (Put all information on plans)

6. Two (2) sets of scale plans (one inch = 20 feet) (3 sets if designer wants a return copy of plan) showing all lot dimensions and indicating the distance to and location of existing and proposed buildings wells and waste disposal systems. If the proposed system or well is closer than seventy-five (75) feet to a boundary, you will need to indicate what is on the adjoining lot. If the lot is so large that it cannot be scaled 1"= 20' on your drawing, two copies of a scale plan with a larger scale must also be submitted. The 1:20 scale plan must also contain pertinent elevation data and location of test pits and percolation test holes. All plans must be folded to 8½" x 11". Show areas of exposed ledge or boulders greater than 6' in diameter within 75' of proposed system.
7. Specific directions so that inspector may easily drive to and find the site. Include mileage referenced from intersections or landmarks to this site. This shall be indicated on a USGS quadrangle map or other suitable location plan.
8. Distance and location of nearest surface water in relation to disposal system (must be a minimum of 75' from all lakes streams, ponds and swamps whether intermittent or year round). If nearest surface water is greater than 75' away a statement to that effect.
9. a. Location of proposed and existing drinking water supply lines. Soil Data (to be determined in leaching area for each system indicate where and when tests were taken). Percolation test data including rate and depth of test.
b. Test Pit Log:
● Show depth from original ground surface to the observed water table.
● Show depth to seasonal high water table (springtime). This may be an estimate based on mottling, NRCS data, etc., (water table must be four (4) feet below the bed during all seasons of the year).
● Show depth from original ground surface to impermeable substratum (i.e. clay or ledge). Clay and hardpan will be considered impermeable unless proven otherwise. Bottom of leach bed, field or dry well must be six (6) feet above any ledge or other impermeable substratum on lots with wells; and a minimum of 4 feet above ledge, etc., on lots with approved off-lot water supplies (municipal or community). P.E. required for ledge lots where system will be greater than 600 GPD.
● Soil description of the predominant soil layers including color notations from the Munsell Soil Color book.
c. Soil survey data for the lot. This information is available at the Local Soil Conservation District office. When taken from current soil map, a copy designating locus and site will be acceptable (state reference source).
10. Where fill is required, filled area must extend a minimum of five (5) feet in all direction beyond the edge of the bed at same elevation as top of the bed before tapering off at a 3:1 slope (3 horizontal to 1 vertical). A minimum of 3" of loam must be placed around the outside of bed to prevent lateral seepage of sewage. All topsoil, roots and organic matter under the leaching system must be removed before fill is placed. Show fill details and material specification on cross section.
11. Number of bedrooms or estimated sewage load in gallons per day.
12. Ground surface elevations for the lot showing the slope of the land at two foot contour intervals. Sufficient spot elevations are required to verify level lots. Show original and proposed contours. Reference contours to a benchmark located near the proposed systems. This topographical information must appear on the 1:20 scale plan.
13. Liquid capacity of septic tank, details and materials of construction.
14. Scale plan of leaching system with construction details and dimensions. Show sill elevations, invert elevations at building exit, inlet and outlet from septic tank, inlet and outlet from distribution box, invert of leach lines and bottom elevation of leaching, area. Inverts must be referenced to your benchmark. Invert may be best indicated on your cross section or profile sections.
15. Make, type and capacity of sewage pump, pump well, discharge line, siphons, siphon chambers, etc. (when used).
16. Number of outlets and name of manufacturer of distribution box (all laterals must be directly connected to distribution box, i.e., no tees in the middle of the bed or field will be allowed).
17. Cross section of leaching trench, leaching bed, or dry well showing all construction details (in leach bed, lines should be uniformly spaced from 3 to 5 feet on center and half of that distance in from the edge of the bed: present requirements for dry wells are 6" minimum of stone around sides of dry well and 1 foot minimum of stone under dry well). Show all fill details on cross section.
18. Type and size of stone. Must be clean and meet septic stone specifications.
19. Type, size and manufacturer of leaching pipe.
20. Type of leaching pipe joints for perforated pipes. (Leach lines shall be interconnected or capped at the end.)
21. Statement that leaching pipes and bottom of leaching area will be laid as level as possible.
22. Show a suitable area for a replacement system where available or state that the system may have to be rebuilt in place, if failure occurs.

NO LIABILITY IS INCURRED BY THE STATE by reason of any approval for construction of individual sewage disposal system plans. Approval by the Department of Environmental Services of individual sewage disposal systems is based on plans and specifications supplied by the applicant. NO GUARANTEE IS INTENDED OR IMPLIED BY REASON OF ANY ADVICE GIVEN BY THE DEPARTMENT OR ITS STAFF.